

PERSONALITY TRAITS
THAT NURSING FACULTY BELIEVE ARE
NECESSARY FOR THEIR GRADUATES

A Thesis Presented to the
Division of Nursing
College of Pharmacy and Health Sciences
Drake University

In Partial Fulfillment
of the Requirements for the Degree
Master of Science in Nursing

by
Kristine L. Bush

April 1993

LOCKER
793
3963
3.2

ACB 7915

PERSONALITY TRAITS
THAT NURSING FACULTY BELIEVE ARE
NECESSARY FOR THEIR GRADUATES

April

1993

by

Kristine L. Bush

Approved by Committee:

Barbara Haag
Barbara Haag, Ph.D., R.N., Thesis Advisor

Shirley Beaver
Shirley Beaver, R.N., M.N.

Mary Beth Gross
Mary Beth Gross, Pharm. D.

DRAKE LIBRARY

TABLE OF CONTENTS

	Page
ABSTRACT.....	iii
LIST OF TABLES.....	iv
ACKNOWLEDGMENTS.....	v
 CHAPTER	
I. DIMENSIONS OF THE PROBLEM.....	1
Statement of the Purpose.....	2
Theoretical Basis of the Study.....	3
Definition of Terms.....	3
Significance of the Study.....	4
II. REVIEW OF THE LITERATURE.....	5
Role Theory.....	5
Competencies of Graduates.....	8
Diploma Graduates.....	9
Associate Degree Graduates.....	10
Baccalaureate Graduates.....	11
Personality Traits of Nurses.....	13
Studies Related to the Personality Traits of Nurses.....	14
Summary.....	25
III. METHODOLOGY.....	28
Research Design.....	28
Subjects and Sampling Method.....	29
Description of Data-Collection Tools.....	32
Demographic Questionnaire.....	33
Desirability of Personality Traits of Registered Nurses Questionnaire.....	34
Description of Data-Gathering Procedure..	36
Protection of Human Rights.....	38
Methods of Analysis.....	39

IV.	ANALYSIS OF DATA.....	41
	Data Analysis.....	41
	Research Question 1.....	41
	Research Question 2.....	44
	Research Question 3.....	47
V.	DISCUSSION AND RECOMMENDATIONS.....	58
	Discussion of the Findings.....	58
	Relationship of the Findings to the	
	Theoretical Basis of the Study.....	73
	Implications for Nursing.....	77
	Limitations of the Study.....	82
	Recommendations for Future Research.....	84
	Summary.....	84
	REFERENCES.....	87
	APPENDICES	
A.	Appendix 1: Demographic Questionnaire....	92
B.	Appendix 2: Desirability of Personality	
	Traits of Registered Nurses	
	Questionnaire.....	95
C.	Appendix 3: Permission to Reproduce	
	Jackson's Defining	
	Characteristics.....	102
D.	Appendix 3: Cover Letter.....	105

ABSTRACT

PERSONALITY TRAITS THAT NURSING FACULTY BELIEVE ARE NECESSARY FOR THEIR GRADUATES

An abstract of a Thesis by
Kristine L. Bush
April 1993

Advisor: Barbara Haag, Ph.D., R.N.

The problem. The purpose of this study was to investigate personality traits that faculty members of different registered nursing education programs believe are necessary for their graduates.

Procedure. One hundred twenty three nursing faculty members of diploma, associate degree, and baccalaureate nursing education programs in the state of Iowa ranked 20 personality traits by completing the Desirability of Personality Traits of Registered Nurses Questionnaire. The subjects also completed a demographic data questionnaire designed by the researcher.

Findings. All faculty members ranked understanding as number one, abasement number 19, and aggression number 20. Significant differences existed between baccalaureate faculty members who ranked change higher than associate degree faculty members, associate degree faculty members who ranked cognitive structure and order higher than baccalaureate faculty members, and diploma faculty members who ranked endurance higher than baccalaureate faculty members. Significant differences also existed for change when faculty members were categorized by age groupings; for cognitive structure and impulsivity when faculty members were categorized by highest level of nursing education; and for endurance, harmavoidance, nurturance, order, and aggression when faculty members were categorized by part-time or full-time status.

Conclusions. Faculty members of the three types of nursing education programs rank the importance of personality traits differently for their graduates.

Recommendations. Examples of recommendation for further research include: a replication of this study including male subjects and an investigation correlating how students rank the personality traits as compared to how faculty members rank them.

TABLES

		Page
Table 1	Demographic Characteristics of the Sample.....	31
Table 2	Means of the Personality Traits Ranked by the Faculty Members of Different Nursing Education Programs.....	42
Table 3	Importance of Personality Traits Ranked by Faculty in Diploma, Associate Degree, and Baccalaureate Programs.....	43
Table 4	Differences in Personality Traits as Ranked by Nursing Faculty Members of Different Nursing Education Programs.....	45-46
Table 5	Differences in Personality Traits as Ranked by Nursing Faculty Members when Categorized by Total Number of Years Teaching in a Nursing Education Program....	49-50
Table 6	Differences in Personality Traits in Nursing Faculty Members when Categorized by Age Groupings.....	51-52
Table 7	Differences in Personality Traits as Ranked by Nursing Faculty Members in Relation to the Highest Level of Nursing Education Completed.....	54-55
Table 8	Differences in Personality Traits Between Full-time and Part-time Nursing Faculty Members.....	57-58

ACKNOWLEDGMENTS

Thank you to my husband Steve for his support, encouragement, and for the many evenings and weekends of babysitting while I was away at class, the library, or working in my office.

Thank you to my children, Jarrod and Rachel, for their patience and adaptability during the many hours I spent working on my thesis. Also, for reminding me that the best methods of stress relief include hugging, kissing, and playing silly games with the ones you love.

Thank you to my parents, Roscoe and Angelina Alexander for all of their support and encouragement throughout this process, for instilling in me the desire to seek new knowledge, and for giving me the self-confidence and determination to reach for and achieve my dreams. Also, thank you for all the hours of babysitting throughout this process, it made leaving Jarrod and Rachel a little easier knowing they were with Grandpa and Grandma.

Thank you to my sister, Kathy Weaver, for all her help with typing, stuffing envelopes, and proof-reading.

Thank you to my niece, Missy Weaver, for all the help with collating, stuffing envelopes, licking stamps, and for helping Grandpa and Grandma babysit.

Thank you to my dear friend, Lynn Howard, for all her support and encouragement.

Thank you to my thesis advisor, Dr. Barbara Haag, for all of her patience, expertise, and guidance during this research process.

Thank you to my thesis committee members, Shirley Beaver and Mary Beth Gross for their participation in this process.

CHAPTER I

DIMENSIONS OF THE PROBLEM

This study investigated whether faculty of diploma, associate degree (ADN), and baccalaureate (BSN) education programs preparing individuals for registered nurse licensure (R.N.) perceive the importance of personality traits differently for their graduates. Lewis and Cooper (1976) reviewed 59 articles found in nursing literature prior to 1976 that examined personality measurement among nurses. Three of these articles pertained to personality traits of registered nurses and 56 pertained to personality traits of nursing students. Since 1976 this investigator found four articles that pertained to personality traits of practicing registered nurses. This investigator was unable to find research that examined the values nursing faculty place on personality traits for their graduates. Since it is nursing faculty members who are educating future nurses it was appropriate to determine how nursing faculty value personality traits of their graduates.

Statement of the Purpose

The purpose of this study was to investigate personality traits that faculty members of different registered nursing education programs believe are necessary for their graduates. Specifically the following three research questions were answered:

1. How do the nursing faculties of diploma, associate degree, and baccalaureate nursing education programs rank the importance of each personality trait?

2. Are there significant differences in the importance given to personality traits believed necessary for their graduates by faculty members of different nursing education programs?

3. Do nursing faculty members rank the importance of personality traits differently depending on the faculty member's gender, the number of years the faculty member has taught in a nursing education program, age, highest level of nursing education completed, and employment status?

Theoretical Basis of the Study

Role theory served as the theoretical basis for this study. Emphasis was placed on the concept of socialization from a role theory perspective.

The nature of socialization from a role theory perspective was defined by Hurley-Wilson (1988) as the learning of social roles that prepare the individual to perform in a specific role. Socialization refers to a learning process that facilitates the socializee's participation and adequate performance in a chosen profession. Socialization, therefore, has significant implications for the development of nursing knowledge and for graduates entering the nursing profession. The discussion of role theory is expanded in chapter II.

Definition of Terms

Terms used in this study were defined as follows:

1. Nursing Faculty Members: Licensed registered nurses teaching in an associate degree, diploma, or baccalaureate nursing education program approved in the state of Iowa.

2. Personality Traits: Twenty characteristics measured on a Likert scale ranging from one to six in ascending order of importance.

Significance of the Study

The significance of this study was the addition of information it will add to the nursing body of knowledge pertaining to nursing faculty members and their beliefs about personality traits of graduates. This knowledge could be helpful to determine if nursing faculty share the same beliefs about personality traits as nurses working in other areas of the nursing profession. Nursing faculty members who shared the same values of personality traits with those of practicing nurses may help to ease the socialization of the new graduate into the nursing profession by providing a more consistent and realistic educational environment. This knowledge may also be important for selecting those nurses who would be best at educating nursing students. It was logical, therefore, to survey nursing faculty members to determine what personality traits they viewed as being important.

CHAPTER II

REVIEW OF THE LITERATURE

The purpose of this study was to investigate personality traits that faculty members of different registered nursing education programs believe are necessary for their graduates. The literature review includes an analysis of literature related to role theory, a description of the competencies of graduates from the three types of nurse education programs, a brief discussion of personality traits of nurses, and an examination of studies related to the personality traits of nurses. A summary concludes the chapter.

Role Theory

Hardy and Hardy (1988) described role theory as a collection of concepts, sub-theories, and diverse sets of empirical research that address specific aspects of social behavior. They listed symbolic interaction and social structure as the two major theoretical perspectives of role theory. Hardy and Hardy explained

that symbolic interaction focuses on individuals. Conway (1988) stated that the symbolic interactionist interprets human behavior as a response to the action of others. Symbols rather than the normative constants were emphasized. The formation of role identity is a complex process of self-conception and the generalized perspective of others. According to the symbolic interactionist, society and its institutions are the framework in which individuals establish their specific roles. Hardy and Hardy explained that the social structure theoretical perspective focuses on the larger picture of society in general. Conway described the underlying assumption of the structural perspective as one that views roles as fixed within society. Attached to these roles are expectations and demands that are re-enforced by either positive or negative sanctions. The structure of society determines the opportunities for individual social interaction. The opportunities to alter the patterns of social interaction are limited. Hardy and Hardy listed the goal of both the symbolic interaction and social structure theoretical perspectives of role theory as the understanding and explanation of the social order. Conway summarized

role theory as concepts that predict how individuals will perform in a specific role or under a given set of circumstances.

Hurley-Wilson (1988) traced the concept of socialization to the mid-1890s. The concept of socialization had varied meanings until 1939. Between 1939 and the present, various theoretical perspectives have given the concept of socialization somewhat differing connotations. However, all definitions seem to include four basic elements: what is learned; how it is learned; why it is learned; and what are the expected results of the socialization process. In the past, it was believed that the socialized person was a passive recipient and that the effect of socializers was unidirectional. Socialization is currently viewed as an interactional and reciprocal process. The individual being socialized and the socializer mutually influence each other.

Hurley-Wilson (1988) pointed out that from the role theorist's view, the nature of socialization has been defined largely in terms of the learning of social roles that prepare the individual for a specific role performance. The content of what is learned in the

socialization process includes both knowledge and behaviors. While many roles within society are extremely vague and open to wide variation in interpretation and enactment, some roles have highly specific behaviors. Nursing is one of these roles that has highly specific behaviors. It is the purpose of the socialization process to assist individuals to acquire the knowledge, skills, and behaviors that will enable them to function appropriately in a given role. The socialization process, therefore, has important implications for the continued development of the nursing profession and the education of students in nursing programs.

Competencies of Graduates

In the National League for Nursing (NLN) there are specific councils that identify expected competencies of their graduates. These councils are the Council of Diploma Programs (CDP), the Council of Associate Degree Programs (CADP), and the Council of Baccalaureate and Higher Degree Programs (CBHDP). The competencies expected of these graduates are described.

Diploma Graduates

The NLN Council of Diploma Programs periodically reviews and revises the statements describing the role, knowledge, and abilities of the graduate of the diploma program in nursing. The last revision was published in 1989. These statements are to serve as a guide to faculties in diploma programs in nursing, students, employers, and the public in their understanding of the role and competencies of the diploma graduate. The graduate of the diploma program, a school under the control of a hospital, is eligible to seek licensure as a registered nurse. The graduate functions within the scope of professional nursing practice as provider, manager, leader, teacher, and advocate. There are twelve competencies listed for the diploma graduate. These competencies include: uses the nursing process when caring for individuals, families, and groups; providing care for promotion, maintenance, and restoration of health; utilizes the skills of collaboration, communication, coordination, management, leadership, and critical thinking; functions as an advocate for the client and the health care system;

includes teaching in the care of the client; practices using a theoretical based body of knowledge, ethical principles, and legal standards; accepts responsibility and accountability for professional and personal practice and development; and participates in health-related community service (NLN, CDP, 1989).

Associate Degree Graduates

The NLN Council of Associate Degree Programs periodically reviews and revises the competency document for the associate degree graduate. The last revision was published in 1990. The competency document is to serve as a guideline to the faculties in associate degree programs, their graduates, and to assist the public in understanding the scope and practice of the graduate of the associate degree program. The goal of the associate degree nursing program is to prepare graduates to provide direct client care, with the main focus of care on the adult client. Upon completion of an associate degree program, the graduate demonstrates the knowledge, skills, and attitudes inherent in the three roles basic

to associate degree nursing practice: provider of care; manager of care; and member within the discipline of nursing. There are 53 competencies listed for associate degree graduate. These competencies include: uses the nursing process; collaborates with the client, family, significant others, and health care team members; provides care to promote and restore health and to provide rehabilitation; provides for physical and psychological safety; uses teaching interventions; is a client advocate; delegates nursing care to other health care workers; practices in an ethical and legal manner; communicates truthfully; supports peers; uses current literature for learning and self-development; and recognizes the importance of nursing research (NLN, CADP, 1990).

Baccalaureate Graduates

The NLN Executive Committee of the Council of Baccalaureate and Higher Degree Programs periodically reviews and revises the statements describing the characteristics of baccalaureate degree programs. The last revision was published in 1987. Baccalaureate

programs are offered by a senior college or university and prepares nurses to function as generalists within the health care system. The foundation of baccalaureate nursing education is drawn from the disciplines of the sciences and humanities. Liberal education is foundational for the development of critical thinking, decision making, and independent judgment. The major in nursing is concentrated at the upper-division level and reflects the interactive nature of nursing science with behavioral, social, physical, natural, and health sciences. The nursing major focuses on the utilization of theory and research as a basis for practice. Graduates are prepared to provide professional nursing service based on theory and research. The following statements characterize the graduates of the baccalaureate program in nursing: uses the nursing process when caring for individuals, families, groups, and communities; provides professional nursing care for promotion, maintenance, illness care, restoration, rehabilitation, health counseling, and education; bases nursing care on knowledge derived from theory and research; synthesizes theoretical and empirical knowledge from the

disciplines of nursing, the sciences, and the humanities; accepts responsibility and accountability for their own nursing practice; uses leadership skills; evaluates research for its applicability to nursing practice; incorporates professional values and ethical, legal, and moral aspects in their nursing practice; and participates in roles designed to meet emerging health needs of the public in a changing society (NLN, CBHDP, 1987).

Personality Traits of Nurses

Sheehan (1985) investigated nursing as an activity that involved interaction between the nurse and those around her/him. Sheehan elaborated that it would be worthwhile to determine the personality traits needed by the nurse to function appropriately in these interactions. The many changes that have occurred in the health care system have increased the number of interactions in which nurses must function. Bradham, Dalme, and Thompson (1991) explained that these interactions are influenced by the personality traits of the professional nurse. Colucciello (1990) stated

that personality traits are vitally involved in the nature of socialization. The socialization process influences the perceptions and attitudes an individual possesses about the profession of nursing and about being a nurse. Colucciello also stated that the process of socialization includes the characteristics, qualities, and roles of the profession in general.

Studies Related to the Personality Traits of Nurses

Lenz and Michaels (1965) studied the possible personality contrasts between medical and surgical nurses. Lenz and Michaels defined surgical nurses as those nurses who took care of preoperative and postoperative patients and medical nurses as those nurses who took care of non-surgical patients. The subject sample included 384 nurses, all of whom had experience on a medical and/or surgical floor at one of three general hospitals in Minnesota. The study was conducted in three parts. The first part investigated the attitudes toward patient care using a "Nurses Opinion Poll". The second part used a "buddy rating device" to separate subjects who were considered to be

excellent nurses from those who were considered to be average nurses. The third part of the study investigated personality variables among the medical/surgical nurses and compared them to neuropsychiatric nurses from a previous study. The tool used by Lentz and Michaels for this part of the study was the Edwards Personal Preference Schedule (EPPS). The results of part one of Lentz and Michaels' (1965) study indicated that those nurses who worked on medical floors were more people minded and that those nurses who worked on surgical floors were more interested in nursing techniques. Results from part two of the study indicated that medical nurses were rated excellent more often in the area of nurse-patient relations than the surgical nurses. The surgical nurses were scored higher in the aspect of technical care. Results from part three of the study indicated that, where statistically significant difference were found, the variable being measured "seemed closely related to the element of people-mindedness"(p. 46). The authors did not provide the name or description of the type of statistical test used to indicate significant differences. The authors indicated that

the following personality variables showed significant differences at $p = < 0.05$ between the medical, surgical, and neuropsychiatric nurses included: order; deference; abasement; change; exhibition; interception; heterosexuality; and dominance. Lentz and Michaels stated that the evidence from their study strengthens the hypothesis that nursing specialties may call for specific personality types.

Cohen, Trehub, and Morrison (1965) used the EPPS tool to study 49 psychiatric nurses at a Veterans Administration hospital. The EPPS was administered to these 49 nurses. The nurses' scores on the EPPS were compared to those of college women standardization group norms and among the three intergroups. The intergroups were based on how the nurses were rated by their supervisors according to the nurses' administrative ability and interpersonal relations with patients. The nurses were then assigned to three groups, A, B, or C, based on these ratings. Group A was described as "best". No description was given for groups B or C, however. The authors did not provide the name of the statistical test used to indicate significant differences. However, the authors

did include the mean scores of the nurses for the EPPS needs. The authors indicated that the nurses scored significantly higher than the norms for the needs of order, endurance, deference, and intraception at the 0.05 level. The nurses scored significantly lower than the norms on the needs for achievement, autonomy, succorance, and exhibition at the 0.05 level. Only two differences were found when the intergroups were compared. Group B nurses scored significantly lower for exhibition than group C. Group B scored significantly higher for endurance than group C. Cohen, Trehub, and Morrison concluded that the results from this study support the notion that groups of nurses have certain distinctive personality characteristics in common.

George and Stephens (1968) conducted a study to identify the personality traits of a group of public health staff nurses and to compare these traits to neuropsychiatric nurses from a previous study. The EPPS test was administered to 116 public health staff nurses. The t-test was used to examine differences in mean scores for each of the 15 traits. The authors did not provide the statistics which indicated

significance. Results of the study indicated that the public health nurses ranked order, intraception, deference, endurance, and achievement as the top five personality traits. The public health nurses ranked dominance, affiliation, nurturance, exhibition, and succorance as the bottom five personality traits. In comparing the public health nurses to the neuropsychiatric nurses there were four needs that showed significant differences. Public health nurses ranked autonomy and abasement higher than the neuropsychiatric nurses. The public health nurses ranked deference and aggression significantly lower than the neuropsychiatric nurses. George and Stephens interpreted the results of this study as supporting the assumption that public health nurses and neuropsychiatric nurses have similar personality traits. George and Stephens also noted that there was a difference in how the subjects ranked personality traits related to age groups. The age group of 23-31 years ranked heterosexuality and assertiveness higher. The age group of 32-47 years ranked the traits of endurance, nurturance, and achievement higher. George and Stephens interpreted these results to indicate that

the age factor apparently influences the scores on the EPPS.

Bruhn, Floyd, and Bunce III (1978) studied the training effects on attitudes and personality characteristics of pediatric nurse practitioner (PNP) graduates. Rotter's Internal-External Locus of Control Scale (I-E), Budner's Intolerance of Ambiguity Scale, and Myers-Briggs Type Indicator were given to applicants of a PNP program. One hundred and sixteen persons applied to the PNP program. Sixty-one were accepted and 43 successfully completed the program. The three tests were re-administered at the end of the program to the 43 graduates. The authors indicated that the data were analyzed using analysis of variance with the $p < 0.05$. However, the authors did not provide the statistics which indicated significance. They reported that students accepted in the program had a judging attitude and were introverted when compared to the non-enrolled applicants. Results within the group of enrolled students showed that by the end of the program they scored significantly higher (entry $M = 6.91$, end $M = 8.42$) on the I-E scale. The students were more externally controlled at the end of the program than

they were on entry. Bruhn, Floyd, and Bunce III also conducted a one year follow-up study after graduation for this group of subjects. Results of this follow-up study showed that at one year post graduation the nurses had almost the identical I-E score they had upon entry to the PNP program (entry $M=6.91$, follow-up $M=6.83$). In addition they had become significantly more intolerant of ambiguity than at the time of graduation (graduation $M=53.18$, follow-up $M=49.97$). Bruhn, Floyd, and Bunce III concluded that attitudinal and personality characteristics of students change somewhat during the learning process. These changes, however, do not persist after the nurses enter their first job in a new role.

Burns, Lapine, and Andrews (1978) used the EPPS to study the personality needs conducive to desired role change for 125 registered nurses in a PNP program. The EPPS was administered to seven classes of students the first day of training and four months later on the last day of the program. The authors indicated that an analysis of variance for repeated measures with class as a between-subject variable was run on pre- and post-scores. The authors did not provide the statistics

which indicated significance but did indicate means. There were significant increases in autonomy (pre M=12.80, post M=13.98), heterosexuality (pre M=14.37, post M=18.18), and exhibition (pre M=11.98, post M=13.03) and significant decreases in endurance (pre M=13.63, post M=12.00), order (pre M=9.81, post M=9.02), dominance (pre M=14.17, post M=13.26), abasement (pre M=12.74, post M=11.80), and nurturance (pre M=16.71, post M=15.85). Burns, Lapine, and Andrews compared the scores of the PNP students with college norms. The analysis of variance showed no significant main effects for class on any of the 15 personality characteristics. In a comparison with psychiatric nurses, combined means for all seven PNP classes were used. The PNP students were found to be significantly higher than psychiatric nurses in achievement, autonomy, intraception, succorance, dominance, nurturance, change, heterosexuality, and aggression. The PNP students were found to be significantly lower than psychiatric nurses in deference, order, exhibition, abasement, and endurance.

Amenta (1984) compared 36 hospice nurses with 35 nurses who were working in traditional settings. The

study was conducted over a three year period and each nurse was given a battery of five tests (Templer Death Anxiety Scale, Purpose in Life, Shneidman "You and Death" Questionnaire, Myers-Briggs Type Indicator, and Cattell 16PF). Data from these five tests were evaluated for statistical significance using the t -test procedure. Results from the Templer Death Anxiety Scale showed that both groups fell close to the high end of "normal", $t(69)=0.44$, $p=0.66$. Results from the Purpose in Life test showed that both groups exhibited a sense of purpose and meaning in life, $t(69)=1.58$, $p=0.119$. The two groups did not differ significantly from each other on either of these dimensions. Comparisons between the groups on the Myers-Briggs Type Indicator showed that both groups were slightly more introverted than extroverted, $t(69)=0.14$, $p=0.892$ and high on the feeling preference, $t(69)=0.26$, $p=0.794$. Only one dimension showed a significant difference. The nurses who worked in a traditional setting were significantly more sensing than the hospice nurses, $t(69)=2.83$, $p=0.006$. Results from the Cattell 16PF test showed the hospice nurses to be significantly more assertive, $t(69)=3.38$, $p=0.001$; imaginative,

$t(69)=2.29$, $p=0.025$; forthright, $t(69)=2.40$, $p=0.019$; radical or free-thinking, $t(69)=2.64$, $p=0.010$; and independent, $t(69)=4.11$, $p=0.000$ than the nurses who worked in a traditional setting. On the Shneidman "You and Death" questionnaire the hospice nurses rated themselves significantly more deeply religious $t(69)=2.06$, $p=.043$ and higher on overall physical health $t(69)=2.42$, $p=0.018$. Also, significantly more hospice nurses felt good to excellent when filling out the test forms $t(69)=2.00$, $p=0.049$. Amenta stated that the results indicate that nurses who worked in traditional settings exhibited stronger preferences than hospice nurses for the practical and no-nonsense approach to life. They were also more conventional and comfortable with structure. Amenta concluded that this information may be useful in the selection of nurses for hospice staff.

Levine, Wilson, and Guido (1988) surveyed members of the American Association of Critical-Care Nurses to determine the psychologic profile of the critical care nurse in terms of self-esteem, gender identity, and selected personality characteristics. Two hundred members responded to the survey which included three

instruments: Cattell's 16PF, the Personal Attributes Questionnaire (PAQ), and the Texas Social Behavior Inventory (TSBI). A standardized score, a sten score, was used to evaluate each of the personality factors in Cattell's 16PF instrument. The PAQ was used to measure gender identity and the TSBI was used to measure self-esteem response. Results from the study indicated that nurses who work in critical care tended to be aggressive, assertive, competitive, persevering, moralistic, resourceful, and mechanical. Critical care nurses also tended to be of the androgynous or masculine type ($F=37.7$, $p<0.0001$) and had higher levels of self-esteem ($t=5.94$, $p<0.005$) than the norm group. Levine, Wilson, and Guido concluded that on the basis of these findings nurses could be identified that would not only enjoy critical care nursing but would remain active in this area.

In a keynote speech, Mershon (1990), stated that many character traits are necessary for nurses to grow individually. It is through this personal growth that nurses will be molding the success of the nursing profession. Decisions such as how to handle relationships that are inherent to the profession of

nursing (relationships with clients, colleagues, and employers) will not only shape a nurse's career, but also the nursing profession (Mershon).

Summary

Role theory suggests that individuals progress through a socialization process while learning a new role. The socialization process is both interactional and reciprocal in nature. The individual assimilates new knowledge and behaviors during the socialization process that enables that individual to assume the new role. Many roles in society are ambiguous and open to a wide variation in interpretation of the behaviors associated with those roles. Other roles in society are associated with highly specific behaviors such as the role of the professional nurse.

The process of socialization has been used as the basis for a number of studies concerning the transition of the new graduate into the role of the practicing registered nurse. The process of socialization begins when the individual starts the educational process and is completed when that individual is able to function

in the role of a professional nurse. One major theme that was evident in the literature on the socialization process was the influence of personality traits.

Major differences in the competencies of the graduates of the three different types of nursing education programs, as identified by their councils, are evident. The baccalaureate graduates, in contrast with the graduates of the other programs, are expected to synthesize theoretical and empirical knowledge from several disciplines with the practice of nursing, apply research to nursing practice, and participate in the implementing nursing roles to meet emerging health needs of the public in a changing society. The associate degree graduates, in contrast to the diploma graduates, are prepared to provide direct client care, with the main focus on care of the adult client. The diploma graduates, in contrast to the associate degree graduates, are prepared to take part in health-related community services.

Previous studies can be found in the nursing literature that examined the personality traits of nursing students and nurses who worked in specialized areas of health care. No studies were found that

examined how nursing faculty members view personality traits of their graduates. Nursing faculty members are the first role models of the nursing student, as well as the first individuals to initiate the socialization process of the nursing student. Examining how nursing faculty members view the importance of personality traits of their graduates was indicated.

CHAPTER III

METHODOLOGY

The purpose of this study was to investigate personality traits that faculty members of different registered nursing education programs believe are necessary for their graduates. In this chapter the design, subjects, data collection tools, data gathering procedure, and protection of human rights are described.

Research Design

The design of this study was descriptive. Polit and Hungler (1991) define descriptive studies as those that "observe, describe, and document aspects of a situation" (p. 175). This study reported the personality traits nursing faculty members believed were important for graduates of their nursing education programs to possess.

Subjects and Sampling Method

The subjects were nursing faculty members of randomly selected diploma, associate degree, and baccalaureate nursing education programs in the state of Iowa. The list of Iowa Board of Nursing approved nursing education programs was obtained. There are 16 associate degree program, five diploma programs, and 12 baccalaureate programs in Iowa. No completion programs were used in this study. All of the associate degree programs were in state supported institutions. All of the diploma programs were in private institutions. One baccalaureate program was in a state supported institution, the remaining 11 were in private institutions.

The desired number of subjects from each type of program was 30. To assure a return of 30 questionnaires from faculty members in each type of nursing education program, questionnaires were mailed to twice that number. In order to achieve that number, faculty from three randomly selected diploma programs, four randomly selected associate degree programs, and six randomly selected baccalaureate programs were sent

questionnaires. The names of the faculty members from each of the randomly selected nursing education programs were obtained from the Iowa Board of Nursing.

Questionnaires were sent to 190 nursing faculty members from the 13 different schools of nursing. Of the 190 questionnaires sent, 75% or 142 were returned. Ten of the returned questionnaires were not used because the faculty members had either retired or were no longer working at that institution. Nine questionnaires were not used for the following reasons: three were incomplete; two were completed by non-nursing faculty members; one subject was on a leave-of-absence from work; one subject taught in two different types of nursing education programs; and two were received after the data had been analyzed. Statistical analysis was completed on 123 of the returned questionnaires.

Demographic characteristics of the 123 subjects are presented in table 1 on page 31. The number of faculty members in the sample from each program varied by no more than two. All of the 123 subjects who returned the questionnaires were females whose ages ranged from 28 to 61 years. Total length of time

Table 1
Demographic Characteristics of the Sample
N=123

Type of program in which currently teaching:	
Diploma	42
Associate Degree	40
Baccalaureate	41
Total length of time in teaching:	
0-3 years	21
4-7 years	20
8-11 years	13
12-15 years	26
16-19 years	23
20 or more years	20
Current employment status:	
Full time	97
Part time	26
Age in years on last birthday:	
28-35 years	16
36-41 years	31
42-47 years	27
48-53 years	24
54 or more years	24
Gender:	
Female	123
Male	0
Initial nursing education program:	
Diploma	52
Associate Degree	12
Baccalaureate	57
Generic Masters Degree	1
Information Not Provided	1
Highest level of nursing education completed:	
Diploma in Nursing	5
Associate Degree in Nursing	3
Baccalaureate in Nursing	51
Master in Nursing	58
Doctorate in Nursing	6
Highest level of non-nursing education completed:	
Baccalaureate	16
Masters	26
Doctorate	4

individual subjects had been teaching in a nursing education program ranged from less than a year to 33 years. Seventy-nine percent of faculty members were employed full time. Data collected on the educational background of the subjects showed that the 42% had initially graduated from a diploma and 46% from a baccalaureate program. One subject indicated that her initial nursing education was a generic masters degree in nursing. The highest level of nursing education of the subjects ranged from a diploma in nursing to a Doctorate in Nursing. Thirteen percent of faculty members had a Baccalaureate in Nursing Degree and 21% had a Master in Nursing Degree. The highest level of non-nursing education for the subjects included 16 baccalaureate degrees, 26 masters degrees, and four doctoral degrees.

Description of Data-Collection Tools

Two questionnaires were used to collect data: a Demographic Questionnaire and the Desirability of Personality Traits of Registered Nurses Questionnaire. A description of each questionnaire follows.

Demographic Questionnaire

The Demographic Questionnaire (Appendix 1) was designed by the researcher. This questionnaire was used to collect data regarding the type of nursing education program in which the subject taught, the number of years in current position, if the subject had taught in any other type(s) of nursing education programs(s) and the length of time taught in these programs, current employment status, the subject's age and gender, the type of nursing program from which the subject initially graduated, the highest level of nursing education attained, and the highest level of non-nursing education attained.

In a pilot study, five nursing faculty were asked to complete this questionnaire to determine clarity and readability. The five faculty members indicated the questionnaire was clear and easy to read.

Desirability of Personality Traits of Registered
Nurses Questionnaire

The Desirability of Personality Traits of Registered Nurses (Appendix 2) is a questionnaire containing 20 personality traits which are ranked using a Likert scale. This questionnaire was used to investigate personality traits that nursing faculty members of different registered nurse education programs believe are necessary for their graduates. A similar questionnaire was used by Bradham, Dalme, and Thompson (1991). Bradham, Dalme, and Thompson included 20 personality traits and defining characteristics from Jackson's (1967) Personality Research Form Scale in their questionnaire. Tinsley (1985) explained that Jackson's personality trait definitions were modifications of definitions developed by Murray (1938) and colleagues at the Harvard Psychological Clinic. Anastasi (1972) stated the following concerning Jackson's definitions:

Unusual care was exercised in the original formulation of items so as to conform to the theoretically-based trait definitions and to

ensure distinctness among trait and reduction of irrelevant variance. Taking Henry Murray's personality framework as a starting point, the author reformulated the trait definitions in the light of subsequent research and theoretical developments(p. 123).

In their questionnaire, Bradham, Dalme, and Thompson used all 20 personality traits and defining characteristics from Jackson's Personality Research Form Scale. This investigator included 20 personality traits and 19 defining characteristics from Jackson's Personality Research Form Scale. Permission to use the Jackson's defining characteristics was obtained from Sigma Assessment Systems, Inc.: Research Psychologist Press Division (Appendix 3). Jackson's defining characteristics for autonomy were contrary to the autonomous role of the nurse in the 1990's. Jackson stated that defining characteristics for autonomy were "unmanageable, free, self-reliant, independent, autonomous, rebellious, unconstrained, individualistic, ungovernable, self-determined, non-conforming, uncompliant, undominated, resistant, and lone-wolf" (p.6). For the purpose of this study, therefore, the

definition of autonomy was: uses expert knowledge and skill to initiate and carry out actions and is accountable for results; authority in decision making; requires expert power (Collins and Henderson, 1991; Munding, 1980). The subjects were asked to rank each personality trait using a Likert scale to determine the importance of each personality trait for graduates to possess. The Likert scale ranged from a score of one to six in ascending order of importance. A score of one or two was ranked as being the least important, a score of three or four was ranked as having moderate importance, and a score of five or six was ranked as being the most important.

Description of Data-Gathering Procedure

Permission was received from Drake University's Human Subjects Research Review Committee to conduct this study (Appendix 4). Prior to data collection a pilot study was conducted. Five nursing faculty members were asked to read the cover letter for clarity, complete the data gathering questionnaires, and record the length of time needed to complete both

questionnaires. The five faculty members took from five to ten minutes to complete the two questionnaires. All five faculty members indicated that the cover letter as well as both questionnaires were clear and easy to read. The five faculty members also indicated the directions on the data gathering questionnaire were clear and easy to understand. Two months later the same group of nursing faculty were asked to complete the data gathering tool a second time. Reliability of the Desirability of Personality Traits of Registered Nurses questionnaire was computed using Spearman's rho correlation coefficient. Eight of the twenty personality characteristics had correlation coefficients of greater than 0.7. Five others had correlation coefficients above 0.5. The remaining 13 had correlation coefficients of less than 0.5. Perhaps these latter correlations were low due to the small sample size.

In November 1992 each faculty member from the randomly selected nursing education programs was sent the Demographic Questionnaire, the Desirability of Personality Traits of Registered Nurses Questionnaire, a cover letter (Appendix 5), a return form indicating

whether the subject would like a copy of the results of the study, and a self-addressed stamped envelope. The subjects were instructed in the cover letter to return the questionnaires by November 23, 1992, two weeks following the day the questionnaires were mailed. Consent to participate in the study was evidenced by completing the questionnaire. Four weeks after the initial mailing, data from the returned questionnaires were analyzed.

Protection of Human Rights

A cover letter accompanied each questionnaire. The cover letter included the purpose of the study, importance of the study, the researcher's name, an explanation of how the subjects were selected, that participation was voluntary, what participation consisted of, how results could be obtained, how to return the questionnaires, how to contact the researcher, that the return of the questionnaire implied the responder's consent to participate, and a thank you to the subjects for participating.

In the cover letter, instructions were given about

how to complete the Demographic Questionnaire and the Desirability of Personality Traits of Registered Nurses Questionnaire and included the approximate time it would take to answer the questions. The subjects were instructed not to write their name on the questionnaires. The subjects were instructed to place the completed questionnaires in the self-addressed, stamped envelope and return it to the researcher within two weeks after receiving the questionnaires.

Methods of Analysis

The Mynstat computer program was used for analysis. An alpha level of 0.05 was established.

In response to research question 1, the mean score for each personality trait was calculated. The mean scores were then used to rank the 20 personality traits in order of importance for each of the faculty groups.

An analysis of variance (ANOVA) was calculated to answer research question two. ANOVA was also calculated on two parts of research question three: the highest level of nursing education, age, and total number of years the faculty members had taught in a

nursing education program. Post hoc testing of differences between means was done using the Tukey HSD (honestly significant difference) statistical test. Hays (1981) stated that the Tukey HSD is simple, widely used, and flexible in application. Independent t -tests were done on the employment status portion of research question 3. Gender was not analyzed as all subjects were female.

CHAPTER IV

ANALYSIS OF DATA

Data Analysis

The purpose of this study was to investigate personality traits that faculty members of different registered nursing education programs believe are necessary for their graduates. Three research questions were answered. In this chapter the results of statistical testing are presented. The alpha was set at .05.

Research Question 1

Research question one asked: How do the nursing faculties of diploma, associate degree, and baccalaureate nursing education programs rank the importance of each personality trait? Table 2 on page 42 presents each personality trait and the means of the trait as ranked by faculty members from different nursing education programs. Table 3 on page 43 depicts

Table 2
Means of the Personality Traits Ranked by the
Faculty Members of Different Nursing Education Programs

PERSONALITY TRAIT	DIPLOMA N=42	ASSOCIATE DEGREE N=40	BACCALAUREATE N=41
Abasement	1.33	1.38	1.20
Achievement	5.62	5.28	5.51
Affiliation	4.64	4.73	4.68
Aggression	1.12	1.15	1.12
Autonomy	5.55	5.43	5.71
Change	4.48	4.30	4.83
Cognitive Structure	4.31	4.38	3.59
Defendence	1.60	1.63	1.37
Dominance	3.05	2.93	3.44
Endurance	4.95	4.50	4.15
Exhibition	1.52	1.73	1.90
Harmavoidance	3.60	3.45	3.44
Impulsivity	1.71	1.63	1.71
Nurturance	5.19	5.43	5.12
Order	4.55	4.63	4.07
Play	4.55	4.33	4.46
Sentience	4.67	4.33	4.27
Social Recognition	3.31	3.65	3.37
Succorance	1.88	2.15	1.85
Understanding	5.79	5.58	5.85

Table 3
Importance of Personality Traits Ranked by Faculty in
Diploma, Associate Degree, and Baccalaureate Programs

RANKING	DIPLOMA	ASSOCIATE DEGREE	BACCALAUREATE
1	Understanding	Understanding	Understanding
2	Achievement	Autonomy/ Nurturance	Autonomy
3	Autonomy		Achievement
4	Nurturance	Achievement	Nurturance
5	Endurance	Affiliation	Change
6	Sentience	Order	Affiliation
7	Affiliation	Endurance	Play
8	Order/Play	Cognitive Structure	Sentience
9		Play/ Sentience	Endurance
10	Change		Order
11	Cognitive Structure	Change	Cognitive Structure
12	Harmavoidance	Social Recognition	Dominance/ Harmavoidance
13	Social Recognition	Harmavoidance	
14	Dominance	Dominance	Social Recognition
15	Succorance	Succorance	Exhibition
16	Impulsivity	Exhibition	Succorance
17	Defendence	Impulsivity/ Defendence	Impulsivity
18	Exhibition		Defendence
19	Abasement	Abasement	Abasement
20	Aggression	Aggression	Aggression

how the faculty members from the different nursing education programs ranked the 20 personality trait.

Faculty members from all three programs ranked understanding as number 1, abasement number 19, and aggression number 20. The personality trait of change was ranked 5 by the baccalaureate faculty members, 10 by the diploma faculty members, and 11 by the associate degree faculty members. The remaining 16 personality traits did not deviate by more than four rankings between the groups of faculty members.

Research Question 2

Research question 2 asked: Are there significant differences in the importance given to personality traits believed necessary for their graduates by faculty of different nursing education programs?

As seen in Table 4 on pages 45 and 46, the analysis of variance indicated a significant difference in four personality traits among faculty members from the three nursing education programs: change

$F(2,120)=3.822$, $p=0.025$; cognitive structure

$F(2,120)=3.990$, $p=0.021$; endurance $F(2,120)=7.746$,

Table 4
Differences in Personality Traits as Ranked by Nursing Faculty Members
Of
Different Nursing Education Programs

Personality Trait	Source of Variance	df	sum of squares	mean square	f ratio	p level	significant pairs
Abasement	Within groups Between groups	2 120	0.723 47.147	0.361 0.393	0.920	0.401	none
Achievement	Within groups Between groups	2 120	2.527 62.124	1.263 0.518	2.440	0.091	none
Affiliation	Within groups Between groups	2 120	0.138 92.496	0.069 0.771	0.090	0.914	none
Aggression	Within groups Between groups	2 120	0.024 17.895	0.012 0.149	0.079	0.924	none
Autonomy	Within groups Between groups	2 120	1.625 54.668	0.813 0.456	1.784	0.172	none
Change	Within groups Between groups	2 120	5.904 92.681	2.952 0.772	3.822	0.025	between BSN & ADN
Cognitive Structure	Within groups Between groups	2 120	15.714 236.302	7.857 1.969	3.990	0.021	between ADN & BSN
Defendence	Within groups Between groups	2 120	1.644 71.006	0.822 0.592	1.389	0.253	none
Dominance	Within groups Between groups	2 120	5.873 180.777	2.937 1.506	1.949	0.147	none
Endurance	Within groups Between groups	2 120	13.559 105.027	6.779 0.875	7.746	0.001	between Diploma & BSN

UNIVERSITY

Table 4 (cont)
Differences in Personality Traits as Ranked by Nursing Faculty Members
of
Different Nursing Education Programs

Personality Trait	Source of Variance	df	sum of squares	mean square	f ratio	p level	significant pairs
Exhibition	Within groups Between groups	2 120	2.980 96.061	1.490 0.801	1.861	0.160	none
Harmavoidance	Within groups Between groups	2 120	0.631 228.117	0.316 1.901	0.166	0.847	none
Impulsivity	Within groups Between groups	2 120	0.200 76.434	0.100 0.637	0.157	0.855	none
Nurturance	Within groups Between groups	2 120	2.041 86.641	1.021 0.722	1.414	0.247	none
Order	Within groups Between groups	2 120	7.293 94.560	3.647 0.788	4.628	0.012	between Diploma & ADN and BSN
Play	Within groups Between groups	2 120	1.032 121.375	0.516 1.011	0.510	0.602	none
Sentience	Within groups Between groups	2 120	3.859 148.157	1.930 1.235	1.563	0.214	none
Social Recognition	Within groups Between groups	2 120	2.704 141.588	1.352 1.180	1.146	0.321	none
Succorance	Within groups Between groups	2 120	2.170 98.627	1.085 0.822	1.320	0.271	none
Understanding	Within groups Between groups	2 120	1.706 33.968	0.853 0.283	3.014	0.053	none

$p=0.001$; and order $F(2,120)=4.628, p=0.012$. Posthoc testing of differences between means using the Tukey HSD statistical test indicated that faculty members from the baccalaureate nursing education programs ranked change significantly higher than faculty members from associate degree nursing education programs. The Tukey HSD indicated that faculty members from associate degree nursing education programs ranked cognitive structure significantly higher than the faculty members from baccalaureate nursing education programs. The Tukey HSD indicated that the faculty members from diploma nursing education programs ranked endurance significantly higher than faculty members from baccalaureate nursing education programs. The Tukey HSD also indicated that faculty members from diploma and associate degree nursing education programs ranked order significantly higher than faculty members from baccalaureate nursing education programs.

Research Question 3

Research question 3 asked: Do nursing faculty members rank the importance of personality traits

differently depending on the faculty member's gender, the number of years the faculty member has taught in a nursing education program, age, highest level of nursing education completed, and employment status? Although the research question indicated that importance of personality traits would be tested when subjects were categorized by gender, this was not done as all subjects were female.

The results of the analysis of variance can be found in Table 5 on pages 49 and 50. No significant differences were found in how faculty members ranked personality traits related to the number of years they had taught in nursing education programs.

As seen in Table 6 on pages 51 and 52, the analysis of variance indicated significant differences in the personality trait of change when nursing faculty members were categorized by age groupings:

$F(4,117)=3.077$, $p=0.019$. Post hoc testing of differences between means using the Tukey HSD statistical test indicated that age group 1 (28-35 years) ranked the importance of change significantly higher than age group 2 (36-41 years), age group 4 (48-53 years), and age group 5 (54 or more years). The

Table 5
Differences in Personality Traits as Ranked by Nursing Faculty Members
when Categorized by
Total Number of Years Teaching in a Nursing Education Program

Personality Trait	Source of Variance	df	sum of squares	mean square	F ratio	P level
Abasement	Within groups	5	3.668	0.734	1.942	0.093
	Between groups	117	44.202	0.378		
Achievement	Within groups	5	3.234	0.647	1.232	0.298
	Between groups	117	61.417	0.525		
Affiliation	Within groups	5	4.975	0.995	1.328	0.257
	Between groups	117	87.660	0.749		
Aggression	Within groups	5	0.300	0.060	0.398	0.850
	Between groups	117	17.619	0.151		
Autonomy	Within groups	5	1.908	0.382	0.821	0.537
	Between groups	117	54.385	0.465		
Change	Within groups	5	7.430	1.486	1.907	0.098
	Between groups	117	91.155	0.779		
Cognitive Structure	Within groups	5	8.631	1.726	0.830	0.531
	Between groups	117	243.385	2.080		
Defendence	Within groups	5	3.862	0.772	1.314	0.263
	Between groups	117	68.789	0.588		
Dominance	Within groups	5	2.912	0.582	0.371	0.868
	Between groups	117	183.738	1.570		
Endurance	Within groups	5	10.220	2.044	2.207	0.058
	Between groups	117	108.365	0.926		

Table 5 (cont)
Differences in Personality Traits as Ranked by Nursing Faculty Members
when Categorized by
Total Number of Years Teaching in a Nursing Education Program

Personality Trait	Source of Variance	df	sum of squares	mean square	f ratio	p level
Exhibition	Within groups	5	3.781	0.756	0.929	0.465
	Between groups	117	95.260	0.814		
Harmavoidance	Within groups	5	4.896	0.979	0.512	0.767
	Between groups	117	223.853	1.913		
Impulsivity	Within groups	5	2.211	0.442	0.695	0.628
	Between groups	117	74.423	0.636		
Nurturance	Within groups	5	6.116	1.223	1.733	0.132
	Between groups	117	82.567	0.706		
Order	Within groups	5	4.183	0.837	1.002	0.420
	Between groups	117	97.670	0.835		
Play	Within groups	5	7.753	1.551	1.582	0.129
	Between groups	117	114.653	0.980		
Sentience	Within groups	5	10.562	2.112	1.747	0.135
	Between groups	117	141.454	1.209		
Social Recognition	Within groups	5	9.899	1.980	1.724	0.135
	Between groups	117	134.394	1.149		
Succorance	Within groups	5	4.016	0.803	0.971	0.439
	Between groups	117	96.781	0.827		
Understanding	Within groups	5	0.200	0.040	0.132	0.985
	Between groups	117	35.475	0.303		

Table 6
Differences in Personality Traits in Nursing Faculty Members
when Categorized by Age Groupings

Personality Trait	Source of Variance	df	sum of squares	mean square	f ratio	p level	significant pairs
Abasement	Within groups Between groups	4 117	0.989 46.388	0.247 0.396	0.624	0.646	none
Achievement	Within groups Between groups	4 117	1.993 62.433	0.498 0.534	0.934	0.447	none
Affiliation	Within groups Between groups	4 117	2.792 88.093	0.698 0.753	0.927	0.451	none
Aggression	Within groups Between groups	4 117	0.314 17.588	0.079 0.150	0.522	0.720	none
Autonomy	Within groups Between groups	4 117	2.859 53.239	0.715 0.455	1.571	0.187	none
Change	Within groups Between groups	4 117	9.179 87.247	2.295 0.746	3.077	0.019	between group 1 & groups 2, 4, 5; between group 3 & group 4
Cognitive Structure	Within groups Between groups	4 117	4.647 246.533	1.162 2.107	0.551	0.698	none
Defendence	Within groups Between groups	4 117	2.687 69.739	0.672 0.596	1.127	0.347	none
Dominance	Within groups Between groups	4 117	13.256 169.899	3.314 1.452	2.282	0.065	none
Endurance	Within groups Between groups	4 117	5.580 112.789	1.395 0.964	1.447	0.223	none

Table 6 (cont)
Differences in Personality Traits in Nursing Faculty Members
when Categorized by Age Groupings

Personality Trait	Source of Variance	df	sum of squares	mean square	F ratio	P level	significant pairs
Exhibition	Within groups	4	5.229	1.307	1.660	0.164	none
	Between groups	117	92.148	0.788			
Harmavoidance	Within groups	4	6.333	1.583	0.834	0.506	none
	Between groups	117	222.167	1.899			
Impulsivity	Within groups	4	1.242	0.311	0.485	0.747	none
	Between groups	117	74.922	0.640			
Nurturance	Within groups	4	4.056	1.014	1.412	0.234	none
	Between groups	117	84.050	0.718			
Order	Within groups	4	1.471	0.368	0.430	0.787	none
	Between groups	117	100.038	0.855			
Play	Within groups	4	6.318	1.580	1.626	0.172	none
	Between groups	117	113.657	0.971			
Sentience	Within groups	4	9.443	2.361	1.942	0.108	none
	Between groups	117	142.237	1.216			
Social Recognition	Within groups	4	7.245	1.811	1.550	0.192	none
	Between groups	117	136.730	1.169			
Succorance	Within groups	4	0.905	0.226	0.268	0.898	none
	Between groups	117	98.800	0.844			
Understanding	Within groups	4	1.451	0.363	1.243	0.297	none
	Between groups	117	34.155	0.292			

Tukey HSD also indicated that age group 3 (42-47 years) ranked change significantly higher than age group 4 (48-53 years).

As seen in Table 7 on pages 54 and 55, the analysis of variance indicated significant differences in the personality traits of cognitive structure $F(4,118)=2.738$, $p=0.032$ and impulsivity $F(4,118)=2.662$, $p=0.036$ when nursing faculty members were categorized by highest level of nursing education. Post hoc testing of differences between means using the Tukey HSD statistical test indicated that faculty members whose highest level of nursing education was a diploma ranked cognitive structure significantly higher than faculty members whose highest level of nursing education was either an associate degree, a masters degree, or a doctoral degree. The Tukey HSD also indicated that faculty members whose highest level of nursing education was a baccalaureate degree ranked cognitive structure significantly higher than faculty members whose highest level of nursing education was an associate degree, masters degree, or a doctoral degree. The Tukey HSD statistical test indicated that faculty members whose highest level of nursing

Table 7
Differences in Personality Traits as Ranked by Nursing Faculty Members
in Relation to the Highest Level of Nursing Education Completed

Personality Trait	Source of Variance	df	sum of squares	mean square	f ratio	p level	Significant Pairs
Abasement	Within groups Between groups	4 118	0.609 47.261	0.152 0.401	0.380	0.822	none
Achievement	Within groups Between groups	4 118	1.489 63.161	0.372 0.535	0.696	0.596	none
Affiliation	Within groups Between groups	4 118	1.202 91.432	0.300 0.775	0.388	0.817	none
Aggression	Within groups Between groups	4 118	0.277 17.642	0.069 0.150	0.463	0.763	none
Autonomy	Within groups Between groups	4 118	1.877 54.416	0.469 0.461	1.017	0.401	none
Change	Within groups Between groups	4 118	3.950 94.635	0.988 0.802	1.231	0.301	none
Cognitive Structure	Within groups Between groups	4 118	21.401 230.615	5.350 1.954	2.738	0.032	between BSN & ADN, MSN, Doctorate; between Diploma & ADN, MSN, Doctorate
Defendence	Within groups Between groups	4 118	3.106 69.545	0.776 0.589	1.317	0.268	none
Dominance	Within groups Between groups	4 118	4.918 181.733	1.229 1.540	0.798	0.529	none
Endurance	Within groups Between groups	4 118	0.981 117.604	0.245 0.997	0.246	0.912	none

Table 7 (cont)
Differences in Personality Traits as Ranked by Nursing Faculty Members
in Relation to the Highest Level of Nursing Education Completed

Personality Trait	Source of Variance	df	sum of squares	mean square	f ratio	p level	Significant pairs
Exhibition	Within groups Between groups	4 118	3.298 95.742	0.825 0.811	1.016	0.402	none
Harmavoidance	Within groups Between groups	4 118	12.344 216.404	3.086 1.834	1.683	0.159	none
Impulsivity	Within groups Between groups	4 118	6.342 70.292	1.586 0.596	2.662	0.036	between Diploma & ADN, BSN, MSN; between Doctorate & ADN, BSN, MSN
Nurturance	Within groups Between groups	4 118	5.176 83.507	1.294 0.708	1.829	0.128	none
Order	Within groups Between groups	4 118	3.380 98.474	0.845 0.835	1.012	0.404	none
Play	Within groups Between groups	4 118	2.684 119.722	0.671 1.015	0.661	0.620	none
Sentience	Within groups Between groups	4 118	3.652 148.365	0.913 1.257	0.726	0.576	none
Social Recognition	Within groups Between groups	4 118	4.617 139.676	1.154 1.184	0.975	0.424	none
Succorance	Within groups Between groups	4 118	3.953 96.844	0.988 0.821	1.204	0.313	none
Understanding	Within groups Between groups	4 118	2.460 33.215	0.615 0.281	2.185	0.075	none

education was a diploma ranked impulsivity significantly higher than faculty members whose highest level of nursing education was an associate degree, baccalaureate degree, or masters degree. The Tukey HSD also indicated that faculty members whose highest level of nursing education was a doctoral ranked impulsivity significantly higher than faculty members whose highest level of nursing education was an associate degree, baccalaureate degree, or masters degree.

As seen in table 8 on pages 57 and 58, independent t -test indicated that part-time faculty members ranked endurance, $t(48.5)=2.344$, $p=0.018$; harmavoidance, $t(58.0)=2.449$, $p=0.014$; nurturance, $t(65.5)=2.100$, $p=0.038$; and order, $t(62.0)=2.961$, $p=0.003$ significantly higher than full-time faculty. Full-time faculty members ranked aggression, $t(95.2)=2.108$, $p=0.035$ significantly higher than part-time faculty members.

Table 8
Differences in Personality Traits Between Full-time and Part-time
Nursing Faculty Members

Personality Traits	Full-time N=96		Part-time N=27		t-value	p level	df
	X	S.D.	X	S.D.			
Abasement	1.271	0.624	1.407	0.636	0.990	0.322	41.1
Achievement	5.427	0.764	5.630	0.565	1.514	0.950	55.6
Affiliation	4.677	0.888	4.704	0.823	0.146	0.884	44.5
Aggression	1.156	0.419	1.037	0.192	2.108	0.035*	95.2
Autonomy	5.552	0.679	5.593	0.694	0.269	0.788	41.1
Change	4.490	0.940	4.704	0.724	1.266	0.106	53.2
Cognitive Structure	3.979	1.472	4.481	1.252	1.769	0.093	48.2
Defendence	1.510	0.795	1.593	0.694	0.526	0.599	47.0
Dominance	3.219	1.224	2.852	1.262	1.343	0.107	40.8
Endurance	4.438	1.003	4.889	0.847	2.344	0.018*	48.5
Exhibition	1.781	0.931	1.481	0.753	1.730	0.069	50.6
Harmavoidance	3.365	1.430	3.963	1.018	2.449	0.014*	58.0
Impulsivity	1.667	0.804	1.741	0.764	0.440	0.660	43.5
Nurturance	5.177	0.906	5.481	0.580	2.100	0.038*	65.5
Order	4.313	0.955	4.778	0.641	2.382	0.003*	62.0

Table 8 (cont)
Differences in Personality Traits Between Full-time and Part-time
Nursing Faculty Members

Personality Traits	Full-time N=96		Part-time N=27		t- value	p level	df
	X	S.D.	X	S.D.			
Play	4.448	0.961	4.444	1.155	0.014	0.989	36.7
Sentience	4.438	1.141	4.370	1.043	0.289	0.772	45.0
Social Recognition	3.500	1.046	3.222	1.219	1.077	0.057	37.4
Succorance	1.979	0.882	1.889	1.013	0.420	0.674	37.8
Understanding	5.740	0.508	5.741	0.656	0.008	0.993	35.2

Chapter V

DISCUSSION AND RECOMMENDATIONS

The purpose of this study was to investigate personality traits that faculty members of registered nursing education programs believe are necessary for their graduates. In this chapter the findings are discussed, the relationship to the theoretical basis is described, significance of the study for nursing is presented, implications for nursing explained, and recommendations for further studies suggested. A summary concludes the chapter.

Discussion of the Findings

The first part of this study investigated how faculty members of different registered nursing education programs ranked 20 personality traits. Understanding was ranked most important by all faculty members. All faculty members ranked achievement, autonomy, and nurturance either second, third, or fourth. The defining characteristics for these four

personality traits indicated an individual had high standards, showed initiative, had accountability, valued knowledge, and cared for others by giving sympathy and comfort. A review of the competencies indicated that graduates from the three nursing education programs were responsible for professional practice, professional development, utilization of the nursing process, and advocacy for patients. The personality traits of achievement, autonomy, nurturance, and understanding are necessary traits in order to accomplish these competencies. Also, most practicing nurses and nurse educators would agree that these personality traits are good for nurses. Perhaps another reason these four were ranked as being most important was due to the positive feelings associated with these personality traits.

Abasement was ranked number 19 and aggression number 20 by all faculty members. Defenceence, exhibition, impulsivity, and succorance were ranked between 15 and 18 by all faculty members. The defining characteristics for these six personality traits indicated an individual was willing to accept an inferior position, liked to argue, was easily annoyed,

took offense easily, wanted to be the center of attention, acted without deliberation, and felt insecure. Abasement, aggression, defence, exhibition, impulsivity, and succorance are personality traits that are usually not acceptable in a nurse. Perhaps the reason these six personality traits were ranked as being the least important was due to the negative feelings associated with them.

All faculty members ranked dominance, harmavoidance, and social recognition as 12, 13, or 14. Defining characteristics for these three personality traits indicated an individual attempts to control the environment, expresses opinions forcefully, enjoys the role of leader, avoids risk of bodily harm, seeks to maximize personal safety, desires to be held in high esteem by acquaintances, is concerned about reputation and what other people think, and works for the approval and recognition of others. Although these personality traits are desirable for nurses, they were not ranked as high as other traits. Perhaps faculty members believed that characteristics associated with personality traits ranked first to eleventh were more beneficial in assisting their graduates to achieve the

competencies of their programs.

The remaining seven personality traits were ranked from fifth to eleventh. It is in this group of seven that significant differences were found between how faculty members of the different nursing education programs ranked the personality traits. Significant differences were found for the personality traits of change, cognitive structure, endurance, and order.

Faculty members who were teaching in baccalaureate programs ranked change significantly higher than faculty members who were teaching in associate degree programs. The mean score for change for baccalaureate faculty members was 4.83 and for associate degree faculty members was 4.48. Defining characteristics for change indicate that an individual likes new and different experiences, may change opinions or values in different circumstances, and adapts readily to changes in environment. Baccalaureate programs are offered by a senior college or university where faculty as well as students are encouraged to seek out different experiences and new knowledge. The nursing education reflects the interactive nature of nursing science with behavioral, social, physical, natural, and health

sciences. Research that looks for new answers and trying new methods is also highly valued in a senior college or university setting. The graduate of a baccalaureate program is able to synthesize theoretical and empirical knowledge from a variety of disciplines with nursing practice. Associate degree programs are offered by community colleges or vocational institutions where education is based on fundamental and concrete information. Associate degree nursing programs focus on preparing the graduate to provide direct client care. Perhaps one reason that faculty members of baccalaureate programs ranked change significantly higher than faculty members of diploma or associate degree programs was due to the different educational focus of their program. Another reason for the difference may be the philosophical differences in the types of institutions in which the faculty members are employed.

Faculty members from associate degree programs ranked cognitive structure significantly higher than faculty members from baccalaureate programs. The mean score for cognitive structure for associate degree faculty members was 4.31 and for baccalaureate faculty

members was 3.59. Defining characteristics for cognitive structure indicate that an individual does not like ambiguity or uncertainty in information, wants all questions answered completely, and desires to make decisions based upon definite knowledge rather than upon guesses or probabilities. An expected competency of graduates of associate degree programs is to recognize the importance of nursing research in advancing nursing practice. An expected competency of graduates of a baccalaureate programs is to evaluate research for the applicability of its findings to nursing practice. Research involves asking questions and looking for answers that are not always concrete in nature. Perhaps one reason baccalaureate faculty members ranked cognitive structure significantly lower than associate degree faculty members is due to the emphasis placed on theory and research at the baccalaureate level and the need to be willing make hypotheses based on theoretical and empirical knowledge.

Faculty members from diploma programs ranked endurance significantly higher than faculty members from baccalaureate programs. The mean score for

endurance for diploma faculty members was 4.95 and for baccalaureate faculty members was 4.15. Defining characteristics for endurance indicate that an individual is willing to work long hours, is persevering, and is patient and unrelenting in work habits. Perhaps the reason the diploma faculty members ranked endurance higher is the fact that diploma schools are under the control of a hospital. Due to the close relationship with the controlling institution, the faculty members and students of diploma programs may develop a greater sense of loyalty to that institution. Perhaps as a result of this loyalty, faculty members and graduates of diploma programs are more willing to work long hours for the betterment of the institution in which they are employed.

Faculty members from diploma and associate degree programs ranked order significantly higher than faculty members from baccalaureate degree programs. The mean scores for order for diploma faculty members was 4.55, for associate degree faculty members was 4.63, and for baccalaureate faculty members was 4.07. Defining characteristics indicate an individual is concerned

with keeping personal effects and surroundings neat and organized, dislikes confusion, and is interested in developing methods for keeping materials methodically organized. One of the competencies of the baccalaureate graduate is the participation in roles designed to meet emerging health needs of the public in a changing society. This may prohibit orderliness in some circumstances. For example, the increasing emphasis on caring for patients in their home and the rapidly changing technology in today's health care system. A nurse may be called upon to implement new technology in a home care setting. The nurse may not have guidelines to follow when establishing this type of care. The nurse may be establishing the guidelines as the care is being implemented. This is perhaps the reason that baccalaureate faculty members ranked order significantly lower than faculty members from the other nursing education programs.

Although no studies were found by this researcher that examined how nursing faculty members valued personality traits, these results indicated some similarity to results obtained in other studies. In a study by Cohen, Trehub, and Morrison (1965) results

indicated that nurses scored significantly lower than the norms for the needs of exhibition and succorance. The subjects in this study also ranked these two personality traits low giving them rankings of 15 to 18. George and Stephens (1968) determined from their study that public health nurses ranked achievement in the top five of a list of personality traits. Achievement was ranked in the top four in this study. The public health nurses ranked exhibition, nurturance, and succorance low on a list of personality traits. Exhibition and succorance also were ranked low in this study. Nurturance, however, was ranked in the top four in this study. George and Stephens did not offer an explanation of why nurturance was ranked low by the public health nurses. When George and Stephens conducted their study, public health nurses visited patients and performed simple cares such as taking vital signs. If problems were identified, the patient was sent to the hospital for care. Today public health nurses help patients to return home to recuperate rather than remaining in the hospital for extended periods of time. These patients are more acutely ill and require higher technological care, including

intravenous pumps and ventilators. The public health nurse today is also more involved with hospice care of patients. Perhaps the difference in rankings between George and Stephens' study and this study was a change in the responsibilities and the type of care the of public health nurse over the past 25 years.

The second part of this study investigated if faculty members ranked the importance of personality traits differently depending on the faculty member's gender, the number of years the faculty member had taught in a nursing education program, age, highest level of nursing education completed, and employment status.

No significant differences were found in how faculty members ranked personality traits when they were categorized by the number of years they had taught in nursing education programs. Most nursing faculty members teach theoretical content in the classroom setting and also maintain close contact with nurses working in other areas of nursing during the clinical component of the nursing program. Perhaps it was this continued exposure to the other nurses that prevented nursing faculty members from losing sight of

personality traits that are important for nurses.

When faculty members were categorized by age groupings, a significant difference was found for the personality trait of change. The younger faculty members ranked change significantly higher than the older faculty members. Defining characteristics of change indicate an individual who likes new and different experiences, dislikes routine, and adapts readily to changes in environment. Perhaps one reason the younger faculty members ranked change higher is that more emphasis is placed on the concept of change today than 25 years ago. Another reason for these findings may be that the younger faculty members have more recently completed their education and are more willing to accept change. George and Stephens (1968) reported that age did not account for differences in change in public health nurses on the Edwards Personal Preference Schedule. Perhaps this difference is due to the fact that a greater emphasis is placed on the concept of change today than 25 years ago when George and Stephens conducted their study.

The faculty members highest level of education influenced the rankings of the personality traits of

cognitive structure and impulsivity. Faculty members whose highest level of nursing education was either a diploma or a baccalaureate degree ranked cognitive structure significantly higher than those faculty members whose highest level of education was either an associate degree, a masters degree, or a doctoral degree. The mean scores for cognitive structure according to the faculty members highest level of education were associate degree, 3.33; masters degree, 3.57; doctoral degree, 3.5; diploma, 4.4; and baccalaureate degree, 4.55. Defining characteristics for cognitive structure indicate that an individual does not like ambiguity or uncertainty in information, wants all questions answered completely, and desires to make decisions based upon definite knowledge, rather than upon guesses or probabilities. The more education individuals have, the more they are willing to deal with ambiguity and uncertainty. Perhaps this is why the faculty members whose highest level of nursing education is a masters degree or a doctoral degree ranked cognitive structure lower than the faculty members with a diploma or a baccalaureate degree. The reason why faculty members whose highest level of

education was an associate degree ranked cognitive structure lower than the faculty members with a diploma or a baccalaureate degree was not clear and difficult to explain. There were only three subjects whose highest level of nursing education was an associate degree. This small number might have influenced the results.

Nursing faculty members whose highest level of nursing education was a diploma or a doctoral degree ranked impulsivity significantly higher than nursing faculty members whose highest level of nursing education was an associate degree, a baccalaureate degree, or a masters degree. The mean scores for impulsivity according to the faculty members highest level of nursing education were diploma, 2.2; doctoral degree, 2.5; associate degree, 1.67; baccalaureate degree, 1.67; and masters degree, 1.53. Defining characteristics for impulsivity indicate that an individual tends to act on the spur of the moment and without deliberation, gives vent readily to feelings, and speaks freely. The reason for these results is difficult to explain. There were only five subjects whose highest level of education was a diploma and six

whose highest level of education was a doctoral degree. These small numbers could have influenced the results.

Faculty members who worked part-time ranked the personality traits of endurance, harmavoidance, nurturance, and order significantly higher than faculty members who worked full-time. The mean score for endurance for part-time faculty was 4.889 and for full-time faculty was 4.438. The mean score for harmavoidance for part-time faculty was 3.963 and full-time faculty was 3.365. The mean score for nurturance for part-time faculty was 5.481 and full-time faculty was 5.177. The mean score for order for part-time faculty was 4.778 and full-time faculty was 4.313. Defining characteristics for these personality traits indicate an individual is willing to work longer hours, avoids risk and seeks to maximize personal safety, gives sympathy and comfort, and is concerned with keeping personal effects and surroundings neat and organized. Perhaps the part-time faculty members ranked these personality traits higher because they do not spend as many contact hours working and therefore believe they must be organized and avoid risk so that they can complete their assigned task. The part-time

faculty member may be asked to work extra and therefore believe that endurance is an important personality trait. It is not clear why part-time faculty would rank nurturance higher than full-time faculty.

Faculty members who worked full-time ranked aggression significantly higher than faculty members who worked part-time. The mean score for full-time faculty was 1.156 and for part-time faculty was 1.037. Defining characteristics for aggression indicate an individual enjoys argument, is easily annoyed, and may seek to get even with people perceived as causing harm. It is unclear why full-time faculty would rank aggression significantly higher than part-time faculty. It should be noted, however, that aggression was ranked number 20 or least desirable by both full and part-time faculty.

Relationship of the Findings to the Theoretical Basis of the Study

Colucciello (1990) stated that personality traits are involved in the nature of socialization. Hurley-Wilson (1988) asserted that individuals learn what

knowledge, skills, and behaviors are necessary for them to function appropriately in a specific role through the socialization process. Although many roles within society are vague, the roles of the nurse include specific behaviors (Hurley-Wilson). Behaviors of nurses are similar in spite of differences in roles. A bedside nurse, an administrator or an educator exhibit some of the same role behaviors. There are some specific role behaviors, however, that are related to the type of nursing education program from which individuals graduate. Nursing faculty members are the first role models as well as the first individuals to initiate the socialization process of the nursing student. Therefore, it would be ideal if the faculty members who were teaching in a specific nursing program ranked personality traits according to what was important for the graduates to possess. This would assist the graduate to attain the competencies of the program. After reviewing the defining characteristics for the four personality traits that faculty members ranked significantly different, and after reviewing the competencies of the graduates of the different types of nursing education programs, it is evident that the

findings of this study supported the fact that nursing faculty members did rank personality traits according to what was important for their graduates to possess in order to attain the competencies of the program upon graduation. For example, faculty members of baccalaureate nursing education programs ranked change significantly higher than faculty members of the associate degree programs. One of the competencies of the graduate of a baccalaureate program is the ability to synthesize theoretical and empirical knowledge from a variety of disciplines with nursing practice. The characteristics associated with change are necessary for the graduate of a baccalaureate program to possess in order to achieve this competency.

The findings of this study indicated that those personality traits that are desirable for all nurses to possess (achievement, autonomy, nurturance, and understanding) were ranked within the highest four by faculty members from the three programs. The findings also indicated that those personality traits that are undesirable in nurses (abasement, aggression, exhibition, impulsivity, and succorance) were ranked as the lowest six traits by all faculty members from the

three programs. These findings are reassuring for nursing in that nursing faculty members from the three types of nursing education programs placed the same values on those personality traits that are desirable and undesirable for nurses to possess. The consistency of choices between the faculty members of the three types of programs will help to ease the socialization process of graduates into the role of the practicing nurse. Faculty members of the three types of programs through the use positive and negative reinforcement in classroom and clinical instruction help to ensure a continuation of these personality traits in future nurses.

The findings of this study also indicated that differences did exist among faculty members of diploma, associate degree, and baccalaureate nursing education programs in how they ranked the importance of personality traits for their graduates. The findings indicated that faculty members did rank the importance of personality traits with respect to those traits that were consistent with the expected competencies of their respective programs. These findings should be viewed positively by both faculty and graduates, in that

faculty members are assisting the graduates toward achieving competencies by placing emphasis on those personality traits that will best assist their graduates. The faculty members can best help their graduates by continuing to be aware of the expected competencies of their graduates as well as those personality traits that will best assist the graduate to achieve the competencies.

Implications for Nursing

This study provides information that should be considered by faculty members of the three types of nursing education programs. This study suggest that faculty members of nursing education programs do rank the importance of personality traits consistently with the competencies of their respective graduates.

Diploma faculty members placed a high level of importance on the personality trait of endurance. Although a high level of importance was placed on endurance this does not indicate that it was actually being taught in these diploma programs. Diploma faculty members need to examine how they may be

unintentionally conveying or re-enforcing this personality trait to their students. While it is commendable that nurses are willing to work long hours, even in the face of great difficulty, diploma faculty members must consider the relationship of working long hours to job related stress and burn out. One of the primary responsibilities of nurses is the safety of their patients. The diploma faculty members also need to remain cognizant that a nurses ability to make quick and accurate decisions decreases with fatigue that occurs after working long hours. Diploma faculty members, therefore, need to be cautious about reinforcing the personality trait of endurance in their graduates in order to protect patients from nursing errors as well as to help decrease the loss of nurses due to job related stress and burn out.

Diploma and associate degree faculty members placed a higher level of importance on the personality trait of order. Many of the graduates of diploma and associate degree programs are employed in acute and long term care institutions where they are responsible for the care of groups of patients. These types of institutions have specific policies and procedures to

guide the care of patients. Working in these types of institutions and caring for groups of patients requires a nurse to be well organized. Since it is these types of institutions where most diploma and associate degree graduates are employed, faculty members of both types of programs need to continue to emphasize the importance of the nurse being organized. These faculty members should include instruction in both the classroom and clinical settings that foster the personality trait of order. By continuing this emphasis on order, faculty members will be assisting the graduates toward achieving the competencies of their programs as well as being an efficient nurse.

Associate degree faculty members placed a higher level of importance on the personality trait of cognitive structure. The emphasis of the associate degree nursing education is on the care of the adult patient in acute and long term care institutions. Due to the many tests and procedures that these patients undergo, the nurses caring for them must have a concrete and accurate knowledge base. It is through this knowledge base that the nurse can provide safe and appropriate care for the patients. The associate

degree nursing faculty can assist their graduates to achieve this competency by continuing to provide instruction in the classroom and clinical settings as well as by emphasizing the need for concrete information on which to base decisions regarding care of the patient.

Baccalaureate faculty members place a higher level of importance on the personality trait of change. In order for the baccalaureate graduate to achieve their competencies, they must be adaptable and willing to try new experiences. Today's rapidly changing health care system requires nurses who are capable and willing to try new methods of delivering health care to an ever changing society. It is the baccalaureate graduate who has been taught the importance of change as well as how to implement change. The baccalaureate faculty needs to continue to emphasize the importance of change in both the classroom and clinical settings.

Baccalaureate faculty members must also be sure to provide opportunities for the students to practice implementing change.

It should be noted that younger faculty members consider the personality trait of change as being more

important than older faculty members. It is not clear, however, the type of program(s) in which the older faculty members taught. It is important for all faculty members regardless of age to realized the importance of change. Perhaps older faculty members need to be more aware of the changing health care environment and convey this information to their students. Nursing faculty members must also keep in mind the changing profile of the nursing student. Many nursing students today are non-traditional students with many other responsibilities in their lives. Nursing faculty members must be willing to make changes in the educational process to assist the non-traditional nursing student successfully through their nursing education.

Faculty members who worked part-time placed a higher level of importance on the personality traits of endurance, harmavoidance, nurturance, and order. Part-time and full-time faculty members need to be aware of the difference in importance placed on these personality traits. Faculty members need to provide consistency in their expectations of the students. Part-time and full-time faculty members may need to

communicate more effectively concerning the importance of personality traits with respect to the competencies of their graduates. Administrators of nursing education programs may need to look at job descriptions and work loads of part-time and full-time faculty to determine if there is equality in the distribution of work.

Limitations of the Study

One limitation of this study was how subjects might have defined the personality traits. Defining characteristics were included for each personality trait to provide consistency in interpretation of the personality traits. Some subjects, however, may have interpreted the defining characteristics differently. This different interpretation could have influenced how the subject ranked the importance of the personality trait.

Another limitation was how the subjects reacted to the terms for the personality traits. Some subjects may have looked at a term for a personality trait, believed they knew the definition for that term, and

therefore may not have read the defining characteristics. For example, some individuals view change as being a positive occurrence while others view change as causing unnecessary disruptions in their work.

The fact that there were no male subjects in the sample was also a limitation. No comparisons could be made about differences that might exist between male and female nursing faculty members and how they view personality traits.

A further limitation was the reliability of the tool. Results of the pilot study indicated that thirteen of the twenty personality traits had correlation coefficients of less than 0.5. These poor correlations could be due to the fact that the pilot study was done with only five subjects. If there had been more subjects in the pilot study, the correlations may have been different.

Recommendations for Future Research

Recommendations for further study include the following:

1. A replication of this study with a tool that has proven reliability;
2. A replication of this study including male subjects;
3. An investigation correlating how students rank the personality traits as compared to how faculty members rank them; and
4. An investigation correlating how practicing registered nurses rank the personality traits as compared to how students and faculty members rank them.

Summary

Personality traits that faculty members of different registered nursing education programs believe are necessary for their graduates were investigated. A total of 190 nursing faculty members from diploma, associate degree, and baccalaureate nursing education programs in the state of Iowa were sent two

questionnaires to determine demographic characteristics and the rankings of 20 personality traits. One hundred and twenty three responses were used in this study.

Faculty members from the three types of nursing education programs ranked achievement, autonomy, nurturance, and understanding as the four most desirable personality traits for their graduates.

Faculty members from the three types of nursing education programs ranked abasement, aggression, defence, exhibition, impulsivity, and succorance as the six least desirable personality traits for their graduates. Significant differences were found between faculty members in the educational programs for change, cognitive structure, endurance, and order. No significant differences were found in desirability of personality traits when faculty members were categorized by the number of years they had been teaching. Significant differences were found in the personality traits of change when faculty members were categorized by age groupings; for cognitive structure and impulsivity when faculty members were categorized by highest level of nursing education; and for endurance, harmavoidance, and order when faculty

members were categorized according to full or part-time employment. Implications of this research for nursing and recommendations for future research were given.

REFERENCES

- Amenta, M.M. (1984). Traits of hospice nurses compared with those who work in traditional settings. Journal of Clinical Psychology, 40, (2), 414-420.
- Anastasi, A. (1972). Tests and reviews: Character-nonprotective personality research form. In O.K. Buros (Ed). (1972). The Seventh Mental Measurements Yearbook (vol.1). New Jersey: The Graafian Press.
- Bradham, C.U., Dalme, F.C., and Thompson, P.J. (1990). Personality traits valued by practicing nurses and measured in nursing students. Journal of Nursing Education, 29, (5), 225-232.
- Bruhn, J.G., Floyd, C.S., and Bunce III, H. (1978). Training effects on attitudes and personality characteristics of nurse practitioners. Psychological Reports, 42, 703-713.
- Burns, B.J., Lapine, L., and Andrews, P.M. (1978). Personality profile of pediatric nurse practitioners. Nursing Research, 27, (5), 286-290.

- Cohen, S.J., Trehub, A., and Morrison, F.G. (1965).
Edward personal preference profiles of psychiatric
nurses. Nursing Research, 14, 318-321.
- Collins, S.S. and Henderson, M.C. (1991). Autonomy:
part of the nursing role? Nursing Forum, 26, (2),
23-29.
- Colucciello, M.L. (1990). Socialization into nursing:
a developmental approach. Nursing Connections, 3,
(2), 17-27.
- Conway, M.E. (1988). Theoretical approaches to the
study of roles. In M.E. Hardy and M.E. Conway
(Eds.), Role theory perspectives for health
professionals (2nd. ed), (p. 63-72). Norwalk,
Connecticut: Appleton & Lange.
- Council of Associate Degree Programs (1990).
Educational Outcomes of Associate Degree Nursing
Programs: Roles and Competencies. Pub. No. 23-
2348. National League for Nursing. New York,
New York, New York.
- Council of Diploma Programs (1989). Role and
Competencies of Graduates of Diploma Programs
in Nursing (2nd ed.). Pub. No. 16-1735.
National League for Nursing. New York.

- Division of Baccalaureate and Higher Degree Programs
(1987). Characteristics of Baccalaureate
Education in Nursing. Pub. No. 15-1758.
National League for Nursing. New York, New York.
- George, J.A. and Stephens, M.D. (1968). Personality
traits of public health nurses and psychiatric
nurses. Nursing Research, 7, (2), 168-170.
- Hardy, M.E. and Hardy, W.L. (1988). Development of
scientific knowledge. In M.E. Hardy and M.E.
Conway (Ed.), Role theory perspectives for health
professionals (2nd. ed.), (p. 29-62). Norwalk,
Connecticut: Appleton & Lange.
- Hays, W. (1981). Statistics. (3rd ed.). New York:
Holt, Rinhart, and Winston.
- Hurley-Wilson, B.A., (1988). Socialization for roles.
In M.E. Hardy and M.E. Conway (Ed.), Role theory
perspectives for health professionals (2nd. ed.),
(p.73-110). Norwalk, Connecticut: Appleton &
Lange.
- Jackson, D.N. (1974). Personality research form
manual. Port Huron, Michigan: Sigma Assessment
Systems, Inc.. Research Psychologists Press
Division.

- Lentz, E.M. and Michaels, R.G. (1965). Personality contrasts among medical and surgical nurses. Nursing Research, 14, 43-48.
- Levine, C.D., Wilson, S.F., and Guido, G.W. (1988). Personality factors of critical care nurses. Heart and Lung, 17, (4), 392-398.
- Lewis, B.R. (1980). Personality profiles for qualified nurses: possible implications for recruitment and selection of trainee nurses. International Journal of Nursing Studies, 17, 221-234.
- Lewis, B.R. and Cooper, C.L. (1976). Personality measurement among nurses: A review. International Journal of Nursing Studies, 13, 209-229.
- Martins, A.C. (1988). Education for professional socialization in nursing. The Australian Journal of Advanced Nursing, 6, (1), 27-29.
- Mershon, K.M. (1990). Personal values, integrity and intellect: Traits that will lead nursing into the 1990s. NSNA/Imprint, September/October, 101-102.
- Mundinger, M. (1980). Autonomy in nursing. Germantown, MD: Aspen.

- Murray, L. and Morris, D. (1982). Professional autonomy among senior nursing students in diploma, associate degree, and baccalaureate nursing programs. Nursing Research, 31, (5), 311-313.
- Polit, D.F. and Hungler, B.P. (1991). Nursing research principles and methods (4th Ed.). Philadelphia: J.B. Lippincott Company.
- Sheehan, J. (1985). A study of the personality traits of nurse tutor students and nurse managers. Nurse Education Today, 5, 185-195.
- Spikerman, S. (1985). Enhancing the socialization process. Nurse Educator, 13, (6), 10-14.
- Tinsley, H.E.A. (1985). Personality research form. In D.J. Keyser and R.C. Sweetland (Ed.), Test Critiques Volume III. (p. 499-509). Kansas City, Mo.: Westport Publishers, Inc.
- Quigley, M.A., Biordi, D.L., Gillies, D.A., and Minnick, A. (1990). Managerial interests and personal attributes of nurses. Journal of Professional Nursing, 6, (5), 280-288.

Appendix 1: Demographic Questionnaire

DEMOGRAPHIC QUESTIONNAIRE

Please complete the following questions by filling in the blank or placing a check in the appropriate space:

- 1). Type of nursing education program in which you teach:
☐ Diploma ☐ Associate Degree
☐ Baccalaureate
- 2). Total length of time in years you have been teaching in this educational program: _____
- 3). Have you taught in this same type of nursing education program in other institutions?
☐ No ☐ Yes
If no, go on to question #4 .
If yes, how many total years have you taught in this type of nursing education program? _____
- 4). Have you taught in a different type of nursing education program that prepares students for R.N. licensure other than the one you are currently teaching in?
☐ No ☐ Yes
If no, proceed to question #5.
If yes, list type(s) of program(s) and the number of years taught in each program _____

_____.
- 5). Current employment status:
☐ Full time ☐ Part time
- 6). Age in years on last birthday: _____
- 7). Gender
☐ Female ☐ Male

- 8). Nursing education program from which you initially graduated:
___ Diploma ___ Associate Degree
___ Baccalaureate
- 9). Highest level of nursing education you have completed:
___ Diploma in Nursing
___ Associate Degree in Nursing
___ Baccalaureate in Nursing
___ Masters in Nursing
___ Doctorate in Nursing
- 10). Highest level of non-nursing education completed:
___ Non-nursing Baccalaureate degree
___ Non-nursing Masters degree
___ Non-nursing Doctoral degree

**Appendix 2: Desirability of Personality Traits
of Registered Nurses Questionnaire**

DESIRABILITY OF PERSONALITY TRAITS OF REGISTERED NURSES

INSTRUCTIONS: This questionnaire consists of 20 personality traits. You are asked to indicate how important it is for graduates of your nursing education program to possess each of these traits. Carefully read the defining characteristics for each personality trait. Using a scale of one to six with one being least important and six being the most important, please indicate the importance of each personality trait by circling the appropriate number.

Example: Honesty: truthful, trustworthy, sincere or genuine.

least important	most important
1 2 3 4 5 6	

By circling 6 this person indicated that honesty is a very desirable personality trait for practicing registered nurses to have.

- 1. Abasement:** Shows a high degree of humility; accepts blame and criticism even when not deserved; willing to accept an inferior position; tends to be self-effacing.

least important	most important
1 2 3 4 5 6	

- 2. Achievement:** Aspires to accomplish difficult tasks; maintains high standards and is willing to work toward distant goals; responds positively to competition; willing to put forth effort to attain excellence.

least important	most important
1 2 3 4 5 6	

most important

1 2 3 4 5 6

4. **Aggression:** Enjoys combat and argument; easily annoyed; sometimes willing to hurt people to get own way; may seek to "get even" with people perceived as causing harm.

most important

1 2 3 4 5 6

- 5. Autonomy:** Uses expert knowledge and skill to initiate and carry out actions and is accountable for the results; authority in decision making; requires expert power.

most important

1 2 3 4 5 6

- 6. Change:** Likes new and different experiences; dislikes routine and avoids it; may readily change opinions or values in different circumstances; adapts readily to changes in environment.

most important

1 2 3 4 5 6

**7. Cognitive
Structure:**

Does not like ambiguity or uncertainty in information; wants all questions answered completely; desires to make decisions based upon definite knowledge, rather than upon guesses or probabilities.

least important

most important

1 2 3 4 5 6

8. Defence:

Ready to defend self against real or imagined harm from other people; takes offense easily; does not accept criticism readily.

least important

most important

1 2 3 4 5 6

9. Dominance:

Attempts to control environment, and to influence other people; expresses opinions forcefully; enjoys the role of leader and may assume it spontaneously.

least important

most important

1 2 3 4 5 6

10. Endurance:

Willing to work long hours; doesn't give up quickly on a problem; persevering, even in the face of great difficulty; patient and unrelenting in work habits.

least important

most important

1 2 3 4 5 6

- 11. Exhibition:** Wants to be the center of attention; enjoys having an audience; engages in behavior which wins the notice of others; may enjoy being dramatic or witty.

least important			most important		
1	2	3	4	5	6

- 12. Harmavoidance:** Does not enjoy exciting activities, especially if danger is involved; avoids risk of bodily harm; seeks to maximize personal safety.

least important			most important		
1	2	3	4	5	6

- 13. Impulsivity:** Tends to act on the "spur of the moment" and without deliberation; gives vent readily to feelings and wishes; speaks freely; may be volatile in emotional expression.

least important			most important		
1	2	3	4	5	6

- 14. Nurturance:** Gives sympathy and comfort; assists others whenever possible; interested in caring for children, the disabled, or the infirm; offers a "helping hand" to those in need; readily performs favors for others.

least important			most important		
1	2	3	4	5	6

- 15. Order:** Concerned with keeping personal effects and surroundings neat and organized; dislikes clutter, confusion, lack of organization; interested in developing methods for keeping materials methodically organized.

least important			most important		
1	2	3	4	5	6

- 16. Play:** Does many things "just for fun"; spends a good deal of time participating in games, sports, social activities, and other amusements; enjoys jokes and funny stories; maintains a light-hearted, easy-going attitude toward life.

least important			most important		
1	2	3	4	5	6

- 17. Sentience:** Notices smells, sounds, sights, tastes, and the way things feel; remembers these sensations and believes that they are an important part of life; is sensitive to many forms of experience; may maintain an essentially hedonistic or aesthetic view of life.

least important			most important		
1	2	3	4	5	6

- 18. Social Recognition:** Desires to be held in high esteem by acquaintances; concerned about reputation and what other people think; works for the approval and recognition of others.

least important most important

1 2 3 4 5 6

- 19. Succorance:** Frequently seeks the sympathy, protection, love, advice, and reassurance of other people; may feel insecure or helpless without such support; confides difficulties readily to a receptive person.

least important most important

1 2 3 4 5 6

- 20. Understanding:** Wants to understand many areas of knowledge; values synthesis of ideas, verifiable generalization, logical thought, particularly when directed at satisfying intellectual curiosity.

least important most important

1 2 3 4 5 6

**Appendix 3: Permission to Reproduce Jackson's
Defining Characteristics**

SIGMA ASSESSMENT SYSTEMS, INC.

P.O. BOX 610984
PORT HURON, MI 48061-0984

PERMISSION TO COPY OR REPRODUCE COPYRIGHT MATERIAL

Sigma Assessment Systems, Inc., on this date **April 10, 1992** hereby authorizes:

NAME: Barbara Haag, Kristine L. Bush

TITLE: Professor, Masters Student

INSTITUTION: Drake University

DEPARTMENT: Division of Nursing

ADDRESS: 1522-17th Street, West Des Moines, IA 50265

(Licensee) to copy or reproduce the material identified below as The Work, subject to all of the terms, conditions, and limitations of this license.

A. The Work: The Work Means:

NAME: The Personality Research Form (PRF)

AUTHOR(S): Douglas N. Jackson, Ph.D.

SPECIFIC FORM OF THE TEST OR THE WORK: Form E

PARTICULAR SCALES OR PARTICULAR WORK USED:

Description of High Scorers from PRF Manual (pages 6-7)

B. Authorized Use: The license granted hereby is specifically limited to the following uses, and no other:

The above named descriptions will be used in a study to determine the most desirable personality traits for nurses.

PERMISSION TO COPY OR REPRODUCE COPYRIGHT MATERIAL....Page 2

- C. **Prohibited Uses:** The license granted herein specifically excludes the right to adapt, revise, or otherwise reproduce, publish, or distribute any copies of the Work (neither separately nor as part of a larger publication, such as in articles, books, research bulletins, or dissertations), except as specifically permitted by Section B and Section F.
- D. **Reservation of Rights:** All rights in the Work not herein granted to the Licensee are expressly reserved by Sigma Assessment Systems, Inc.
- E. **Non-Transferability:** This license is not non-transferable. Any attempt to transfer the license will automatically revoke it.
- F. **Reproduced by Permission:** Any copy, reproduction, or other use authorized hereby shall be accompanied by full reference to the source of the original material and the author(s). The statement shall include the phrase:

"Reproduced by Permission." All copies shall bear the appropriate copyright notice that appears on the cover of the material used. This notice shall appear on the title page of each reproduction or copy of the Work. It should be noted that a total of not more than ~~100~~³⁰⁰ ~~admin-~~^{KL3}istrations may be prepared. This permission is valid for a **one** year period beginning with the date of this authorization. Further permission to copy or reproduce copyright material beyond this one year period will require a renewal of Permission between the Licensee and Sigma Assessment Systems, Inc. ^{LL}

G. <u>Fees:</u>	Licensing Fee	\$15.00
	Test use royalty	(waived)
	TOTAL	\$15.00

- H. **Required Signatures:** This license is not effective unless signed by an authorized official of Sigma Assessment Systems, Inc. and unless countersigned by the Licensee.

ACCEPTED AND AGREED:

SIGMA ASSESSMENT SYSTEMS, INC.

Kristin L. Bush, RN, BS.

Licensee

Lauren Moffatt

Authorized Signature

April 21, 1992

Date

May 12, 1992

Date

Appendix 4: Cover Letter

Kristine L. Bush, R.N., B.S.
1522-17th Street
West Des Moines, Iowa 50265

November 9, 1992

Dear Colleague:

I am Kristine L. Bush, a graduate student in the Master of Science in Nursing program at Drake University, Des Moines, Iowa. As part of my graduate work I am surveying nursing faculty to determine what personality traits they believe are important for their graduates. Results of the study will add to the body of knowledge on personality traits of nurses. I would greatly appreciate your participation.

Your participation involves completion of two questionnaires. The first is a Demographic Questionnaire that asks for information such as age, years of experience, type of nursing education, etc. On the second questionnaire, Desirability of Personality Traits of Registered Nurses, you are asked to rank the importance of 20 different personality traits on a scale of one to six with one being least important and six being most important. It will take approximately 5-10 minutes to complete both questionnaires.

Participation in this study is voluntary. All data will be reported in aggregate form protecting your anonymity. Do not write your name on the questionnaires. Your consent to participate in this study is indicated by completion and return of the questionnaires. No nursing education program will be identified by name.

I would appreciate a return of these questionnaires by Monday, November 23, 1992.

A summary of the results of this study will be available by June, 1993. If you wish to receive a copy of the results please complete and return the enclosed form or you may contact me at (515)-225-9638 and the results will be mailed to you.

Sincerely,

Kristine L. Bush, R.N., B.S.

Please send me a copy of the results of your research study.

Name: _____

Address: _____
